

August 11, 2005

Dear CDBG Applicant:

Welcome to the City of Falls Church annual Housing & Community Development Grant Program Application for Fiscal Year 2007! We are excited about receiving your proposal and extend our helping hand if you have any questions about your proposal. This application may seem a bit intimidating, but we're here to help you put your proposal together so that you may serve the Falls Church City community.

The City of Falls Church, through an agreement with Arlington County, receives federal Community Development Block Grant (CDBG) and Home Investment Partnerships (HOME) funds. CDBG and HOME funds are used to develop viable urban communities by providing decent housing and a suitable living environment, and expand economic opportunities, principally for persons with low- and moderate-incomes. Through this grant application, the City provides CDBG and HOME funds to eligible public and private organizations to deliver services and activities that benefit City residents. Although the application includes funding for both CDBG and HOME, HOME funds may only be used for housing activities and it is the City's intent to continue using all of the HOME funds to operate a rental assistance program.

The City's Housing Commission and the Human Services Advisory Council, citizens' advisory groups, review and make recommendations for each proposal and the City Council ultimately decides which proposals shall be funded. Members of the public are invited to attend all public meetings pertaining to the CDBG program.

All applicants will be required to attend a pre-application orientation meeting (by appointment only) prior to application submission. Preliminarily selected applications will be invited to give a brief presentation before the Falls Church Housing Commission on the following (tentative dates): October 20 or October 25 at 7:00pm at City Hall. Final dates and times will be provided to applicants that are preliminarily selected for final review.

If you have questions or would like assistance in completing your proposal, please call the Housing & Human Services Division at 703-248-5005, (Virginia Relay Center TTY/711). **Proposals** (original and two copies) must be received/postmarked by 5:00pm September 16, 2005, at the following address:

City of Falls Church Housing and Human Services Division 300 Park Avenue, West Wing, Suite W-100 Falls Church, Virginia 22046

CONSOLIDATED PLAN PRIORITIES

All of the proposed activities must meet one of the following priorities as identified in the City's Fiscal Year (FY) 2006-2010 Consolidated Plan for Housing & Community Development. A full copy of the City's Consolidated Plan is available at the following website:

http://www.fallschurchva.gov/services/hhs/ConsolidatedPlan.html

Create Affordable Housing Opportunities

- Increase opportunities for households with low- and moderate-income to become and remain homeowners and renters
- Increase the supply of new affordable rental housing units as part of mixed income development
- Promote lead hazard education for housing reconstruction projects
- Preserve existing multifamily rental housing stock and retain affordable units within such developments
- Increase the range of housing options and related services for special needs populations

Prevent Homelessness & Provide Transitional Housing

- Continue to provide emergency shelter for homeless individuals
- Create support network for families at risk of homelessness
- Provide transitional housing with services for chronically homeless individuals

Provide Services to Special Needs Population

- Assist persons with special needs to live as independently as possible
- Increase housing opportunities for persons with disabilities

Increase Economic Opportunity

- Assist families and individuals moving from poverty or public assistance to stability and selfsufficiency
- Promote workforce development through education and training in order to increase individual and household incomes

COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) PROGRAM

MEETING A NATIONAL OBJECTIVE

Each proposed activity must meet the CDBG program National Objective of benefit to persons with lowand moderate-incomes. Low and Moderate-Income means that the household's income does not exceed the limits noted in the table below:

CDBG LOW & MODERATE INCOME LIMITS FY2006

NUMBER OF PERSONS IN HOUSEHOLD

INCOME LEVEL	1	2	3	4	5	6
CDBG Housing Activities Maximum Income (MI)	\$50,000	\$57,150	\$64,300	\$71,450	\$77,150	\$82,850
CDBG Non-Housing activities Maximum Income (LI)	\$40,600	\$46,400	\$52,200	\$58,000	\$62,650	\$67,300
Very Low Income	\$31,250	\$35,700	\$40,200	\$44,650	\$48,200	\$51,800

HOME PROGRAM MAXIMUM INCOME LIMITS FY 2006

		NUM	BER OF PERSO	NS IN HOUSEH	HOLD	
	1	2	3	4	5	6
60						
%	\$37,500	\$42,840	\$48,240	\$53,580	\$57,840	\$62,160

CDBG ELIGIBLE ACTIVITIES

Each proposal must be an eligible CDBG activity. The following is a list of activities eligible for CDBG funds:

- (a) Acquisition/disposition of real estate property for any public purpose
- (b) Acquisition, construction, reconstruction, rehabilitation or installation of public facilities and improvements
- (c) Clearance, demolition, removal of buildings and improvements or environmental contaminants, and movement of structures to other sites.
- (d) Operation public services (including labor, supplies and materials) such as those concerned with employment, crime prevention, child care, health care, education, homebuyer down payment assistance, public safety, fair housing counseling, recreation, senior citizens, homeless persons, drug abuse counseling and treatment, and energy conservation counseling and testing. The services must meet each of the following criteria:
 - The service must either be new or a quantifiable increase in the level of a service above that which has been provided with state or local funds in the previous twelve calendar months; and
- (e) Relocation payments and assistance to displaced individuals, families, businesses, non-profit organizations, and farm operations.
- (f) Payment to housing owners for losses of rental income incurred in holding units for persons displaced by relocation activities.
- (g) Homeownership Assistance (e.g. down payment & closing cost assistance).
- (h) Financial or technical assistance to persons wishing to start a business where that business has or will have five or fewer employees, at least one of whom is the owner.
- (j) Rehabilitation of privately owned residential buildings and improvements; publicly and privately owned commercial or industrial buildings, except that assistance is limited to improvements to the exterior of the building and the correction of code violations; non-profit owned, non-residential buildings and improvements.
- (k) The acquisition, construction, reconstruction, rehabilitation or installation of commercial or industrial buildings, structures, and other real property equipment and improvements, including railroad spurs or similar extensions. Such activities may be carried out by the recipient or public or private non-profit subrecipients.
- (1) Special activities by community-based development organizations (CBDO). Grants or loans to any CBDO qualified under this section to carry out a neighborhood revitalization, community economic development, or energy conservation project.



CITY OF FALLS CHURCH, VIRGINIA FISCAL YEAR 2007 – CD 32 (July 1, 2006 – June 30, 2007)

HOUSING & COMMUNITY DEVELOPMENT SUBRECIPIENT APPLICATION

Part B

APPLICATION CHECKLIST

The following is a list of the items that will be requested as part of the application. Please note that the applicant's response to items (a) and (c) may not exceed a total of 5 pages. Pages

- (a) Project Summary (Narrative)
 - —Need/Problem to be addressed (consistent with priorities established in the City's Consolidated Plan
 - —Population/Area served (including estimated numbers of clients and other measurable outputs)
 - —Description of work (including who will carry it out and how eligibility and National Objective requirements will be met)
 - —Proposed Schedule of Work
- (b) Detailed Budget Information including all funding sources (see PART C)
- (c) Agency Information
 - —Background/Program Experience
 - —Personnel/Staff Capacity
 - —Financial Capacity
 - —Monitoring
 - —Audit Requirements
 - —Insurance/Bonding/Worker's Compensation
- (d) Standard Required Documents/Forms
 - —Articles of Incorporation/Bylaws
 - —State and Federal Tax Exemption Determination Letters
 - —List of Board Members
 - —Authorization to Request Funds
 - —Designation of Authorized Official(s)
 - —Organizational Chart
 - —Resumes of Program Administrator and Fiscal Officer
 - —Annual Financial Statements and Audit

Project Summary

Briefly describe the proposed project. The narrative should include and quantify the need or problem to be addressed in relation to the City's Consolidated Plan, as well as the population to be served. Describe the work to be performed, including the activities to be undertaken or the services to be provided, the goals and objectives, method of approach, and the implementation schedule.

In your project summary, further:

- □ Indicate how you will identify clients. Provide an estimate of the number of clients to be served and describe them in terms of age, gender, ethnicity, income level, and other defining characteristics. Note: The performance goals identified in your application will be incorporated into your service agreement if your proposal is selected.
- Be very specific about who will carry out the activities, the location in which they will be carried out, the period over which the activities will be carried out, and the frequency with which the activities will be carried out, and the frequency with which services will be delivered.
- □ For service programs, include how you propose to coordinate your services with other community agencies and leverage resources.
- Describe the site where the program will be implemented. How will clients get to the facility? What efforts will your agency and partners make to promote your program and reach isolated individuals? Describe how the facility complies with Americans with Disabilities Act (ADA) requirements regarding accessibility.

Agency Information

Background/Program Experience

Include the length of time the agency has been in operation, the date of incorporation, the purpose of the agency, and the type of corporation. Describe the type of services provided, the agency's capabilities, the number and characteristics of clients served, and license to operate (if appropriate).

Personnel/Staff Capacity

Briefly describe the agency's existing staff positions and qualifications, its capacity to carry out this activity, and state whether the agency has a personnel policy manual.

Financial Capacity

Describe the agency's current operating budget, itemizing revenues and expenses. Identify commitments for ongoing funding. Describe the agency's fiscal management, including financial reporting, record keeping, accounting systems, payment procedures, and audit requirements.

Monitoring

Briefly describe how you will monitor progress in implementing the program. Attach copies of all data collection tools that will be used to verify achievement of program goals and objectives. Describe who will be responsible for monitoring progress.

Audit Requirements

In accordance with the Office of Management and Budget Circular A-133, the Federal Government requires that organizations expending \$300,000 or more in Federal financial assistance in a fiscal year must secure an audit. Agencies requesting \$300,000 or more must choose one of the three ways of meeting this requirement and state which method they chose:

- 1) If your agency already conducts audits of all its funding sources including CDBG, the agency must submit a copy of its most recent audit, and may, at its discretion, include the CDBG portion of the audit cost in its CDBG project budget.
- 2) If your agency already conducts audits of its other funding sources but has neither received nor included CDBG in the past, the scope of the audit would be modified to incorporate CDBG audit requirements. The associated cost of the augmentation could then be included in the CDBG project budget, accompanied by the auditor's written cost estimate.
- 3) If your agency does not have a current audit process in place, your agency will be required to include a 10-percent set aside in the CDBG project for the provision of an audit.

Insurance/Bonding/Worker's Compensation

State whether or not the agency has liability insurance coverage, in what amount, and with what insuring agency. State whether or not the agency pays all payroll taxes and worker's compensation as required by Federal and state laws. State whether or not the agency has fidelity bond coverage for principal staff who handle the agency's accounts, in what amount, and with what insuring agency.

Required Documents to Attach

Articles of Incorporation/Bylaws

Articles of incorporation are the documents recognized by the State as formally establishing a private corporation, business or agency. If you applied for CDBG funds in last year and supplied this information, you are not required to submit it again. However, if this information has been modified, please provide it with this application.

Non-profit Determination

Non-profit organizations must submit tax-exemption determination letters from the Federal Internal Revenue Service and the State. If you applied for CDBG funds in last year and supplied this information, you are not required to submit it again. However, if this information has been modified, please provide it with this application.

List of the Board of Directors

A list of the current board of directors or other governing body of the agency must be submitted. The list must include the name, telephone number, address, occupation or affiliation of each member and must identify the principal officers of the governing body.

If you applied for CDBG funds in last year and supplied this information, you are not required to submit it again. However, if this information has been modified, please provide it with this application.

Authorization to Request Funds

Documentation must be submitted of the governing body's authorization to submit the funding request. Documentation of this requirement consists of a copy of the minutes of the meeting in which the governing body's resolution, motion or other official action is recorded.

Designation of Authorized Official

Documentation must be submitted of the governing body's action authorizing the representative of the agency to negotiate for and contractually bind the agency. Documentation of this requirement consists of a signed letter from the Chairperson of the governing body providing the name, title, and address and telephone number of each authorized individual.

Organizational Chart

An organizational chart must be provided that describes the agency's administrative framework and staff positions, <u>indicates where the proposed project will fit into the organizational structure</u>, and identifies any staff positions of shared responsibility. If you applied for CDBG funds in last year and supplied this information, you are not required to submit it again. However, if this information has been modified, please provide it with this application.

Financial Statement and Audit

Resume of the Chief Program Administrator

If you applied for CDBG funds in last year and supplied this information, you are not required to submit it again. However, if this information has been modified, please provide it with this application.

Resume of the Chief Fiscal Officer

If you applied for CDBG funds in last year and supplied this information, you are not required to submit it again. However, if this information has been modified, please provide it with this application.



CITY OF FALLS CHURCH, VIRGINIA FISCAL YEAR 2007 – CD 32 (July 1, 2006 – June 30, 2007) HOUSING & COMMUNITY DEVELOPMENT SUBRECIPIENT APPLICATION

Part C

PROJECT OVERVIEW, BUDGET & PERFORMANCE WORKSHEETS

Discuss all funding sources, proposed and confirmed. Complete the line item budget worksheet, (Attachment A or B, as appropriate). All applicants must complete Attachment C.

Amount of Funds Requ	ıested:			
(Round to the nearest hundre				
			_	
Project Name:				
Project				
Description:				
Address of				
Project:				
Application Submitted	by:			
Address:	•			
Contact Person:			Title:	
Work Phone Number:		Home Pho	one Nur	nber:
	•			,
Alternate Contact		Title:		
Person:				
Work Phone Number:		Home Pho	one Nur	nber:

Information furnished to the City of Falls Church, Department of Community Services, Housing & Human Services Division will be maintained and disseminated for governmental purposes in accordance with the Virginia Freedom of Information Act, Code of Virginia, Section 2.1.340 through 346.1, as amended, and the Privacy Protection Act of 1976, Code of Virginia Sections 2.1.377 through 386, as amended. This application will be made available in large print or on audio cassette. For further information on obtaining this document in other formats, contact 703-248-5005; Virginia Relay TTY/711.

PROGRAM PERFORMANCE WORKSHEET

NOTE: THE PERFORMANCE GOALS IDENTIFIED IN YOUR APPLICATION WILL BE INCORPORATED INTO YOUR SERVICE AGREEMENT IF YOUR PROPOSAL IS SELECTED.

Suitable Living Environment Benefit families, individuals, or communities by addressing living environment Decent Affordable Housing Housing Programs to meet individual family or community needs Creating Economic Opportunities Economic Development, Commercial Revitalization, or Job Creation	Identify which objective will be met for this activity: Example: Decent Affordable Housing Build emergency shelter for the purpose of creating safe spaces for homeless persons
Availability/Accessibility Activity makes services, infrastructure, housing or shelter available or accessible to persons with low and moderate incomes Affordability Provides affordability in the lives of persons with low and moderate incomes Sustainability: Promoting Livable or Viable Communities Activity is aimed at improving communities or neighborhoods, helping to make them living or viable for persons with low and moderate incomes	Identify which outcome will be met for this activity and the description of the activity: Example: Availability/Accessibility New access to shelter services (no other shelter in the City)
Output Indicators (choose one) 1) Estimated Number of persons and households or units to be assisted 2) Estimated number of new businesses assisted, retained 3) Estimated number of jobs created or retained 4) Estimated number of housing units created/preserved/rehabilitated that are/will be affordable	Indicate the Output indicator for this activity and provide the output number Example: 20 homeless persons

Applicant	Project Title

ATTACHMENT A: Line Item Budget Form - Service Projects

Guidance: Please use the following format to present your proposed line item budget. In column A, list the items for which you anticipate the need for CDBG funds. In Column B, provide the calculation explaining how you arrived at the estimated cost of the line item. In Column C, provide the projected request for CDBG funds. On Attachment C, provide description of other funds and volunteer and donated services/resources to be used in the project.

Budget Item Calculation CDBG Request PERSONNEL Salaried Positions - Job Titles Salaried Positions - Job Titles Provide rate of pay (hourly/salary) and percentage of time spent on project (Full-Time Equivalent) or hours per week Salaries Total Fringe Benefits PERSONNEL TOTAL Total of Personnel & Fringe Benefits Personnel & Fringe Benefits Provide description of how you arrive at total for each line item Supplies Equipment Rent/Lease Insurance Printing Telephone Travel Other Total OPERATING CONTRACT SERVICES BUDGET TOTAL TOTAL CONTRACT SERVICES BUDGET TOTAL Provide description of how you arrive at total for each line item Supplies BUDGET TOTAL BUDGET TOTAL Provide description of how you arrive at total for each line item Supplies BUDGET TOTAL BUD	project.	_	
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of time spent on project (Full-Time Equivalent) or hours per week Salaries Total			
hours per week	Salaried Positions – Job Titles	Provide rate of pay (hourly/salary) and percentage	
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Equipment Rent/Lease Insurance Printing Telephone Travel Other TOTAL OPERATING CONTRACT SERVICES TOTAL CONTRACT SERVICES	Supplies		
Rent/Lease Insurance Printing Telephone Travel Other TOTAL OPERATING CONTRACT SERVICES TOTAL CONTRACT SERVICES	Equipment		
Insurance Printing Telephone Travel Other TOTAL OPERATING CONTRACT SERVICES TOTAL CONTRACT SERVICES			
Printing Telephone Travel Other TOTAL OPERATING CONTRACT SERVICES TOTAL CONTRACT SERVICES	Rent/Lease		
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Other TOTAL OPERATING CONTRACT SERVICES TOTAL CONTRACT SERVICES			
TOTAL OPERATING CONTRACT SERVICES TOTAL CONTRACT SERVICES	Travel		
TOTAL OPERATING CONTRACT SERVICES TOTAL CONTRACT SERVICES	Other		
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BUDGET TOTAL BUDGET TOTAL	TOTAL CONTRACT SERVICES		
BUDGETTOTAL			
	BUDGET TOTAL		

Applicant	Project Title
	ATTACHMENT B: Line Item Budget Form – Construction/Acquisition Projects

Guidance: Please use the following format to present your proposed line item budget. In column A, list the items for which you anticipate the need for CDBG funds. In Column B, provide the calculation explaining how you arrived at the estimated cost of the line item. In Column C, provide the projected request for CDBG funds. On

Attachment C, provide a description of other funds and volunteer and donated services/resources to be used in the project.

Α	В	С
Budget Item	Calculation	CDBG Request
PERSONNEL		
Salaried Positions – Job Titles	Provide rate of pay (hourly/salary) and percentage of	
	time spent on project (Full-Time Equivalent) or hours per week	
	Week	
Salaries Total		
Fringe Benefits		
PERSONNEL TOTAL	Total of Personnel & Fringe Benefits	
DELIVERY COSTS	Provide description of how you arrive at total for each line item	
Acquisition		
Development		
Rehab Hard Costs		
Physical Inspections		
Architectural Engineering		
Rehab Loan Costs		
Permits and Fees		
Insurance		
Legal Fees		
Financing		
Appraisal Costs		
Other		
TOTAL OPERATING		
CONTRACT SERVICES		
TOTAL CONTRACT SERVICES		
BUDGET TOTAL		

ATTACHMENT C: Supplemental Budget Form – Use of Other Resources

I.	Describe your plans to use other funds on this project. In this section, only describe funds that are secured. Provide the source of funds, amounts and how these funds will be used.
П.	Describe your plans to seek new funding to supplement CDBG funding. Describe the sources to which you will apply, the amounts sought and the proposed use of those funds.
III.	Describe your use of donated goods and services. Estimate the value of these services and describe how you arrive at these amounts.
IV.	Please provide an explanation for any unusual budget expenditures listed in the line item budget on the previous page.
V.	Explain why you consider your program costs to be reasonable.

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